								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO								10 1000/62						
Effective October 1, 2003														
CLAIMS AS FILED - PART I (Column 1) (Column 2)									EN	mr □	OTHER THAN OR SMALL ENTITY			
T	OTAL CLAIMS		30	,			-	RATE FEE		FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUM	MBER EXTRA		BASIC F	ΕE	385.00	OR	Basic Fee	770.00	
TOTAL CHARGEABLE CLAIMS			70 minus 20=		. 0			X\$ 9:			OR	X\$18=		
INDEPENDENT CLAIMS			G m	inus 3 =	./			X43= 63		(3	OR	X86=		
MI	ILTIPLE DEPE	NDENT CLAIM P	RESENT				7			77		.000		
* If the difference in column 1 is less than zero, enter "0" in column 2								+145=		7 - 7	OR	+290=		
,								TOTAL	۱ آ	(W)	OR	TOTAL		
	Column 1) (Column 2) (Column 3)							SMAL	LE	NTITY	OR	OTHER SMALL		
4		CLAIMS HIGH		HIGH	EST	ST				ADDI-	7	-	ADDI-	
AMENDMENT A	·	AFTER AMENDMENT		PREVIO	USLY	EXTRA-		RATE		TIONAL	•	RATE	TIONAL FEE	
	Total	. 7	Minus	* 6	20	2		.X\$ 9=	1		OR	X\$18=		
	Independent	. 3	Minus	•••	5		l	X43=	+			X86=		
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+		OR			
ONG.								+145=	_L		OR	+290=		
0	2-19-06 (Column 1) (Column 2) (Column 3)							TOTA VODIT. FE			OR ,	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)														
T B		REMAINING AFTER		NUME	ER	PRESENT EXTRA		RATE		ADDI- IONAL:		RATE	ADDI- TIONAL	
AMENDMENT		AMENDMENT		PAID		EXINA	1		╽.	FEE			FEE	
	Total	• 3	Minus .	- 2	0	= ()		X\$ 9=		10	OR	X\$18=		
AME	Independent	NTATION OF AN	Minus	ENDENT.	2	[*]		X43=	I	-()	OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									T		OR	+290=		
											OR ,	TOTAL		
	•	~	DOIT. FEI	_			0011.1 CC							
AMENDMENT C	`	(Column 1) CLAIMS REMAINING		(Colum HIGHE NUMB	ST	(Column 3) PRESENT	Г		T	ADDI-	7 [ADDI-	
		AFTER AMENDMENT	•	PREVIO	USLY	EXTRA	ı	RATE		IONAL FEE	ı	RATE	TIONAL	
	Total	•	Minus	. 200		•		X\$ 9=	T		OR	X\$18=		
	Independent		Minus	***		•	·	X43=	t		. 1	X86=		
\Box	FIRST PRESE	NTATION OF MU	LTIPLE DEP	PENDENT	CLAIM		· -	~~=	╀	f	OR	· ·		
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.											DA	+290=		
11	the 'Highest Nun	nter Previously Pal	d For IN THIS	S SPACE IS	less than	20, enter "20."	AE	TOTAL DOTT, FEE	-		OR A	TOTAL DOTT. FEE		
		nber Previously Paid ber Previously Paid					tour	d in the ap	ppro	priate box i	in colu	mn 1.	ł	